

## List of Property Acquired or Sold – Tax Code Section 11.182 Community Housing Development Organization Improving Property for Low-Income and Moderate-Income Housing

Property Previously Exempt

Property Tax
Form 50-264

Appraisal District's Name	Phone (area code and number)
Address, City, State, ZIP Code	
<b>GENERAL INSTRUCTIONS:</b> This form is for use by organizations receiving exemptions under Tax Code §11.182 zation has been acquired or sold during the preceding year, the organization must file with the chief appraiser in located a list of such properties acquired or sold during the preceding year. The organization must use this form mentation required.	n the county in which the relevant property is and must furnish all information and docu-
<b>FILING DEADLINE:</b> Pursuant to Tax Code §11.182(i), if any property owned by an organization receiving an exe acquired or sold during the preceding year, the organization must file this form by March 31 of the following year	
STEP 1: Provide Name and Mailing Address of Organization and Identity of Person Preparing	g List
Name of Organization receiving exemption under Tax Code 11.182 for which list of acquired and/or sold property is being filed	
Mailing Address	
City, State, ZIP Code	Phone (area code and number)
Organization is a (check one):	
Partnership Corporation Other (specify):	
Name of Person Preparing this List Title	
Step 2: List properties sold or acquired during the preceding year.	
This organization acquired or sold the following properties during the preceding year,	
PROPERTY ACQUIRED:	
1. Street Address:	
Legal Description:	
Appraisal District Account Number (if known):	
Date of Acquisition:	
2. Street Address:	
Legal Description:	
Appraisal District Account Number (if known):	



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3.	treet Address:	_
	egal Description:	
	ppraisal District Account Number (if known):	
	ate of Acquisition:	
PF	PERTY SOLD:	
1.	treet Address:	_
	egal Description:	
	ppraisal District Account Number (if known):	_
	ate Sold:	
2.	treet Address:	
	egal Description:	
	ppraisal District Account Number <i>(if known)</i> :ate Sold:	
3.	treet Address:	
	egal Description:	
	ppraisal District Account Number (if known):	
	ate Sold:	
S	EP 3: Read, Sign, and Date	
Ву	gning this form, you certify that the information provided is true and correct to the best of your knowledge and belief.	
si h	¹ e <b>▶</b>	
	Authorized Signature Date	_
Pri	d Name	

If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Section 37.10, Penal Code.